PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number.

16717187

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | |
|--|--|---|------------------|------------------------------------|---------------------------|----------------------------------|------------|--------------------|------------------------|-----------|----------------------------|------------------------|
| TOTAL CLAIMS | | | 17 | | | | 7 (| RATE | FEE | 7 | RATE | FEE |
| FOR | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | | OR | BASIC FEE | | |
| TOTAL CHARGEABLE CLAIMS | | | /7 minus 20= * | | * | | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | |) minus 3 = * | | | | | X43= | | OR | X86= | |
| M | JLTIPLE DEPE | NDENT CLAIM P | RESENT | | | | | +145= | | OR | +290= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | olumn 2 | Į | TOTAL | #3850 |] | TOTAL | |
| CLAIMS AS AMENDED | | | | | าก 2) | (Column 3) | <u>)</u> _ | SMÄLL | | OR | OTHER SMALL I | |
| AMENDMENT A | Electur | CLAIMS REMAINING . AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | BER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | .17 | Minus | - 2 | <u>D</u> . | - — | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | * | Minus | *** | 3 | | 4 [| X43= | | OR | X86= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +145= | | OR | +290= | |
| | | | | | | | | TOTAL DDIT. FEE | | OR | TOTAL ADDIT, FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | IER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | ÷ | Minus | ** | • | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | AAA | | = |] [| X43= | | OR | X86= | |
| | FIRST PRESE | NTATION OF MU | LTIPLE DEP | ENDENT | CLAIM | | ┚┠ | +145= | | OR | +290= | |
| | | | | | | | - | TOTAL DDIT. FEE | | OR | TOTAL ADDIT, FEE | |
| | | (Column 1) | | (Colum | ın 2) | (Column 3) | | | | | | |
| MEN | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIOI PAID F | ER USLY | PRESENT EXTRA |][| RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | | Minus | *** | | = | | X43= | | OR | X86≃ | • |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | | | | |
| T | nie mignest Num he *Highest Num! | nber Previously Paid ber Previously Paid | or For (Total or | SPACE is Independen | tess than it) is the l | i 3, enter "3." highest numbe | er foun | d in the appi | opriate box | in colu | umn 1. | |